

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-878)

SERIAL NO. 09/59.2,695 FILING DATE
APPLICANT

4-3-04 3-7-0 CLAIMS

	ORIGINAL		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DER.	IND.	DER.	IND.	DER.
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TOTAL IND.	3	0	3	0		0
TOTAL DER.	10	0	10	0		0
TOTAL CLAIMS	13		13			

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TOTAL IND.						
TOTAL DER.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS